

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:

ANTHONY J PICKETT SR
CHRISTAL D GRAHAM
Debtor(s)

Case No. 07-23682

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 12/18/2007.
- 2) The plan was confirmed on 02/28/2008.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on 03/13/2008.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was completed on 04/09/2013.
- 6) Number of months from filing to last payment: 64.
- 7) Number of months case was pending: 77.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$49,200.00.
- 10) Amount of unsecured claims discharged without payment: \$64,765.32.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$24,203.74
Less amount refunded to debtor	\$863.73

NET RECEIPTS:

\$23,340.01

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$3,329.50
Court Costs	\$0.00
Trustee Expenses & Compensation	\$1,417.92
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION:

\$4,747.42

Attorney fees paid and disclosed by debtor:	\$170.50
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Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ACMC PHYSICIAN SERVICES	Unsecured	500.00	332.00	332.00	144.35	0.00
ADVOCATE HEALTH CTR	Unsecured	50.00	NA	NA	0.00	0.00
AMERITECH	Unsecured	163.87	NA	NA	0.00	0.00
AMERITECH	Unsecured	395.27	NA	NA	0.00	0.00
ARONSON FURNITURE	Secured	NA	540.00	540.00	0.00	0.00
ARONSON FURNITURE	Unsecured	1,070.35	814.96	814.96	354.34	0.00
ASSET ACCEPTANCE LLC	Unsecured	513.00	528.94	528.94	229.98	0.00
ASSET ACCEPTANCE LLC	Unsecured	700.00	782.90	782.90	340.40	0.00
ASSET ACCEPTANCE LLC	Unsecured	534.14	555.00	555.00	241.31	0.00
AT&T BROADBAND	Unsecured	113.00	NA	NA	0.00	0.00
CALUMET CITY FIRE DEPT	Unsecured	270.30	NA	NA	0.00	0.00
CAPITAL ONE BANK	Unsecured	1,310.84	NA	NA	0.00	0.00
CAPITAL ONE BANK	Unsecured	966.48	NA	NA	0.00	0.00
CAPITAL ONE BANK	Unsecured	978.01	NA	NA	0.00	0.00
CHASE MANHATTAN MORTGAGE CO	Secured	94,935.39	82,283.24	NA	0.00	0.00
CHASE MANHATTAN MORTGAGE CO	Secured	8,200.00	11,429.39	NA	0.00	0.00
CITIBANK	Unsecured	17,155.75	NA	NA	0.00	0.00
CITY OF CALUMET CITY	Unsecured	250.00	NA	NA	0.00	0.00
COMCAST	Unsecured	461.54	NA	NA	0.00	0.00
COMMONWEALTH EDISON	Unsecured	NA	1,669.71	1,669.71	725.97	0.00
COMMUNITY HOSPITAL	Unsecured	NA	197.05	197.05	85.68	0.00
COMMUNITY HOSPITAL ANESTHESI	Unsecured	197.05	NA	NA	0.00	0.00
DEVON FINANCIAL	Unsecured	NA	293.16	293.16	127.46	0.00
DOCTORS & MERCHANTS CREDIT	Unsecured	NA	NA	NA	0.00	0.00
EAST BAY FUNDING	Unsecured	201.31	433.65	433.65	188.55	0.00
ECAST SETTLEMENT CORP	Unsecured	335.00	334.44	334.44	145.41	0.00
FORD MOTOR CREDIT	Unsecured	8,094.89	NA	NA	0.00	0.00
FORD MOTOR CREDIT	Unsecured	7,921.24	7,921.24	7,921.24	3,444.08	0.00
HAMMOND CLINIC	Unsecured	355.00	894.38	894.38	388.87	0.00
HAMMOND PATHOLOGISTS	Unsecured	733.38	NA	NA	0.00	0.00
INGALLS HOSPITAL	Unsecured	1,325.01	NA	NA	0.00	0.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ISAC	Unsecured	1,771.49	2,181.68	2,181.68	948.57	0.00
ISAC	Unsecured	17,424.22	21,416.51	21,416.51	9,311.68	0.00
JEFFERSON CAPITAL SYSTEMS	Unsecured	668.09	961.75	961.75	418.16	0.00
KASPER HEATON WRIGHT & PGNI	Unsecured	1,058.45	NA	NA	0.00	0.00
NICOR GAS	Unsecured	796.87	NA	NA	0.00	0.00
NICOR GAS	Unsecured	350.71	NA	NA	0.00	0.00
NORTHSHORE CLINICAL LAB	Unsecured	59.95	NA	NA	0.00	0.00
PEDIATRIC DENTAL ASSOC	Unsecured	NA	2,187.62	2,187.62	951.86	0.00
PRA RECEIVABLES MANAGEMENT	Unsecured	NA	200.00	200.00	86.96	0.00
PRA RECEIVABLES MANAGEMENT	Unsecured	NA	165.49	165.49	71.95	0.00
PREMIER BANK CARD	Unsecured	438.24	537.47	537.47	233.69	0.00
PRONGER SMITH MEDICARE	Unsecured	NA	104.04	104.04	44.62	0.00
PROVIDIAN	Unsecured	1,630.94	NA	NA	0.00	0.00
PROVIDIAN	Unsecured	646.00	NA	NA	0.00	0.00
RED OAK MEDICAL INC	Unsecured	70.18	NA	NA	0.00	0.00
SCHOTTLER & ASSOCIATES	Priority	3,199.00	NA	NA	0.00	0.00
SHERMAN ACQUISITION	Unsecured	2,120.39	NA	NA	0.00	0.00
SHERMAN ACQUISITION	Unsecured	850.00	NA	NA	0.00	0.00
SOUTHEAST ANESTHESIA CONSULT	Unsecured	90.00	NA	NA	0.00	0.00
ST FRANCIS HOSPITAL	Unsecured	120.00	NA	NA	0.00	0.00
ST MARGARET MERCY HEALTH	Unsecured	48.94	NA	NA	0.00	0.00
SULLIVAN URGENT AID	Unsecured	30.10	NA	NA	0.00	0.00
SULLIVAN URGENT AID	Unsecured	258.00	NA	NA	0.00	0.00
VILLAGE OF CALUMET PARK	Unsecured	250.00	250.00	250.00	108.70	0.00

Summary of Disbursements to Creditors:

	Claim Allowed	Principal Paid	Interest Paid
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$540.00	\$0.00	\$0.00
TOTAL SECURED:	\$540.00	\$0.00	\$0.00
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$42,761.99	\$18,592.59	\$0.00

Disbursements:

Expenses of Administration	<u>\$4,747.42</u>
Disbursements to Creditors	<u>\$18,592.59</u>

TOTAL DISBURSEMENTS :	<u>\$23,340.01</u>
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12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 05/05/2014

By: /s/ Tom Vaughn

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.